



ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	17X	70191	5/16
O.I.P.E. CLASSIFIER			7-202-02
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		71471	5/12

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
— (Through numeral) Canceled A Appeal
..... Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	8/16/2001
2	✓	✓	8/16/2001
3	✓	✓	8/16/2001
4	✓	✓	8/16/2001
5	✓	✓	8/16/2001
6	✓	✓	8/16/2001
7	✓	✓	8/16/2001
8	✓	✓	8/16/2001
9	✓	✓	8/16/2001
10	✓	✓	8/16/2001
11	✓	✓	8/16/2001
12	✓	✓	8/16/2001
13	✓	✓	8/16/2001
14	✓	✓	8/16/2001
15	✓	✓	8/16/2001
16	✓	✓	8/16/2001
17	✓	✓	8/16/2001
18	✓	✓	8/16/2001
19	✓	✓	8/16/2001
20	✓	✓	8/16/2001
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here